

SEVENTH
ANNUAL REPORT
OF
THE DIRECTORS
OF THE
GLASGOW
Asylum for Lunatics,
LIMITED,
IN TERMS OF THEIR CHARTER,
TO
A General Meeting of Contributors,
4th JANUARY, 1821.

Glasgow,
PRINTED BY JAMES HEDDERWICK,
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# SEVENTH ANNUAL REPORT

OF

*The Directors*

OF THE

**Glasgow Asylum for Lunatics.**

THE Directors of the GLASGOW ASYLUM FOR LUNATICS, submit to the Contributors and to the Public, an account of their management during the last year, in this their SEVENTH ANNUAL REPORT.

|                                      | <i>Males</i> | <i>Females</i> | <i>Total</i> |
|--------------------------------------|--------------|----------------|--------------|
| In the Asylum, 1st January, 1820,... | 64           | 42             | 106          |
| Admitted since, .....                | 51           | 32             | 83           |
| Do. from relapse, .....              | 3            | 1              | 4            |
|                                      | <hr/> 118    | <hr/> 75       | <hr/> 193    |
| Dismissed Cured, .....               | 31           | 13             | 44           |
| Do. Relieved, .....                  | 7            | 13             | 20           |
| Do. by desire, .....                 | 5            | 3              | 8            |
| Do. Unfit, .....                     | 1            | 0              | 1            |
| Died, .....                          | 5            | 3              | 8            |
| Remaining, 31st December, 1820,...   | 69           | 43             | 112          |
|                                      | <hr/> 118    | <hr/> 75       | <hr/> 193    |

The proportion of deaths was smaller, last year, than it was during the year immediately preceding, as will be seen, on comparing the above statement with that of the last Annual Report. The Patients, in four of the fatal cases, were subject to epilepsy; and although, by prompt and active treatment, some of them had frequently been relieved from imminent danger, yet they all sunk under repeated attacks of that malady, and all died apoplectic. One Patient, in whom no previous bodily ailment had been observed, fell down, and suddenly died in the airing-ground. Death, in this case, was occasioned by an incurable disease of the heart. Another Patient, who was subject to high, and almost continual delirium, sunk into a state of extreme debility, in consequence of a severe degree of an inflammatory disease \*, and, after lingering for three months, died, with symptoms not unlike those which occur in the last stage of malignant fever. Two Patients who were far advanced in life, and who had both been, for a long course of years, insane, died of an affection of the bowels †, a disease which, when it occurs in aged maniacs, often proves to be irremediable. In all these eight cases, death was occasioned by causes evidently natural. And yet an unusually great number of our Patients, manifested a strong propensity to self-destruction; but so carefully were all known means whereby they could injure themselves removed, and so closely were they watched, some of them by night, as well as by day, that happily no instance of suicide occurred.

While a smaller proportion of the Patients died,

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\* Erysipelas.

† Diarrhœa.

there was some increase in the proportion of the cures. All who were cured, and of whom any accounts have been received, remain well, except two Patients, who, at the desire of their friends, had been dismissed long before the usual time of probation had expired. A considerable number of those who were cured, had fortunately been sent to the Asylum, soon after the symptoms of their lunacy first appeared: and, as a proof of the great importance of early treatment, it may be stated, that thirteen Patients, who were admitted within two weeks after the time when they became insane, were all dismissed cured, three months after admission, and some of them within a much shorter period. One young man, who was admitted in a state of violent frenzy, on the second day after he had been seized with the malady, was cured in the course of ten days. At the earnest request of his friends, he was dismissed in less than a fortnight after his recovery, and nearly three months ago. We are happy to learn, that he remains perfectly rational, conducting himself in business with great steadiness and propriety. Other instances might be mentioned of recovery and dismissal, nearly as speedy. But, in general, about two months of probation, after the commencement of convalescence, is advisable; and no degree of responsibility ought to attach to the Institution, on account of a relapse in the case of any Patient who, at the instance of his relatives or guardians, has been prematurely dismissed.

In regard to the treatment for lunacy, much still remains obscure. But although, in many cases, little good can be done, it is of importance to know enough, if possible, not to do harm; and, in order to obtain this



knowledge, some experience is necessary. Many of the cases of Patients sent to the Asylum, have, before admission, been judiciously treated; but some of them, even of considerable standing, have not been at all under medical care; or, the Patients having been placed at inconvenient distances from their proper medical attendants, have been committed chiefly to the care of persons not sufficiently skilled in the treatment of the disease. Violent measures are still too often employed, where milder treatment judiciously conducted would be more effectual; and powerful drugs, and irritating applications are not unfrequently administered without due discrimination. Some cases do not admit of great evacuations, and are even aggravated or rendered more obstinate by depletion; yet, to the inexperienced, these cases may appear to be similar to others, where copious bleedings and other evacuations are indispensably necessary. On this point, our opinion is corroborated by that of Pinel, Esquirol, and other eminent physicians, all of whom are sparing in the use of the lancet, and lay much stress on the necessity of carefully distinguishing those cases where bleeding may be useful, from those in which it must be injurious. It is, no doubt, natural for relatives to study concealment, and, in some cases, to hope that the malady may subside, without the knowledge even of their usual medical attendant; but, by delay, a degree of mental derangement, which might be speedily relieved, becomes obstinate, and the time is lost for curing those diseases of the body, with which the state of the mind is sometimes connected. It cannot be too strongly pressed on the consideration of relatives, that there ought to be no delay in placing the insane under proper care. The advantage of early treatment, already exemplified, may

to a certain extent be appreciated, by means of the following Tables\*.

*following*

These Tables comprehend the number of the Patients admitted, during one year after the 30th June, 1819, without including any of the number, amounting to 107 at that date remaining in the Asylum. The Tables are constructed from the records, as furnished, by Mr. Drury. Minute distinctions are not aimed at. Under the term, *furiosi*, are classed all cases of continual high mental excitement. Under the terms, *melancholia*, or *fervens* and *melancholia*, are comprehended all other forms of the malady, except the cases enumerated under the terms, *phrenitis*, *phrenia*, or *phrenia*. One of the principal objects in instituting these Tables, was to ascertain the proportion of our cures, exclusive of the great number of our incurables, many of whom have been in the Asylum ever since it was opened. But it has long been evident, that the Tables do not afford a fair estimate of our cures. ~~Thus, in the Table for the year 1819, there remained in the Asylum, 25 of the Patients who had been admitted during the preceding year, as may be seen in the Tables published in the last Annual Report. These Patients have their cases changed according to the state of the malady which then existed. But many of them have since been cured. Yet none of their cures are registered in the Tables now published, or would ever be noticed in any future Table, according to the plan hitherto followed. A similar defect, of course runs through all the former Tables. Even in the second or third year of treatment, a considerable proportion of our Patients are cured, and if all our cures were fairly recorded, their number in each set of Tables would be greatly augmented. A different mode of constructing the Tables will be adopted in the next Annual Report.~~

+ Third Annual Report

~~MALE PATIENTS, OLD CASES.~~

| Classification of Cases when admitted. | How Dismissed. |           |            |               |       | State of those Remaining. |                      | Totals of the several Classifications |
|----------------------------------------|----------------|-----------|------------|---------------|-------|---------------------------|----------------------|---------------------------------------|
|                                        | Cured.         | Relieved. | By desire. | Un-<br>cured. | Died. | Improved.                 | Continuing the same. |                                       |
| Furious,.....                          | 2              | 0         | 1          | 0             | 0     | 0                         | 1                    | 4                                     |
| Melancholy,.....                       | 0              | 0         | 0          | 0             | 0     | 0                         | 2                    | 2                                     |
| Furious and Melancholy.                | 0              | 0         | 0          | 0             | 0     | 0                         | 1                    | 1                                     |
| Imbecile,.....                         | 1              | 0         | 0          | 0             | 1     | 1                         | 2                    | 5                                     |
| Fatuous, .....                         | 1              | 2         | 4          | 0             | 0     | 3                         | 1                    | 11                                    |
| Idiots,.....                           | 0              | 0         | 0          | 0             | 0     | 0                         | 1                    | 1                                     |
| Total,.....                            | 4              | 2         | 5          | 0             | 1     | 4                         | 8                    | 24                                    |

~~FEMALE PATIENTS, OLD CASES.~~

| Classification of Cases when admitted. | How Dismissed. |           |            |               |       | State of those Remaining. |                      | Totals of the several Classifications |
|----------------------------------------|----------------|-----------|------------|---------------|-------|---------------------------|----------------------|---------------------------------------|
|                                        | Cured.         | Relieved. | By desire. | Un-<br>cured. | Died. | Improved.                 | Continuing the same. |                                       |
| Furious,.....                          | 0              | 0         | 1          | 0             | 0     | 0                         | 1                    | 2                                     |
| Melancholy,.....                       | 0              | 0         | 0          | 0             | 0     | 0                         | 1                    | 1                                     |
| Furious and Melancholy.                | 0              | 0         | 0          | 0             | 0     | 0                         | 0                    | 0                                     |
| Imbecile,.....                         | 0              | 0         | 0          | 0             | 1     | 0                         | 2                    | 3                                     |
| Fatuous,.....                          | 0              | 0         | 1          | 0             | 0     | 1                         | 1                    | 3                                     |
| Idiots,.....                           | 0              | 0         | 0          | 0             | 0     | 0                         | 0                    | 0                                     |
| Total,.....                            | 0              | 0         | 2          | 0             | 1     | 1                         | 5                    | 9                                     |



## MALE PATIENTS, RECENT CASES.

| Classification of Cases when admitted. | How Dismissed. |           |             |              |       | State of those Remaining. |                      | Total of the several (Classification). |
|----------------------------------------|----------------|-----------|-------------|--------------|-------|---------------------------|----------------------|----------------------------------------|
|                                        | Cured.         | Relieved. | By disease. | Transferred. | Died. | Improved.                 | Continuing the same. |                                        |
| Furious,.....                          | 10             | 2         | 0           | 0            | 1     | 2                         | 1                    | 24                                     |
| Melancholy,.....                       | 4              | 4         | 0           | 0            | 0     | 0                         | 0                    | 8                                      |
| Furious and Melancholy,                | 1              | 0         | 0           | 0            | 0     | 0                         | 1                    | 2                                      |
| Imbecile,.....                         | 1              | 0         | 0           | 0            | 1     | 0                         | 0                    | 2                                      |
| Fatuous,.....                          | 0              | 2         | 1           | 0            | 1     | 1                         | 0                    | 7                                      |
| Idiot,.....                            | 0              | 0         | 0           | 0            | 0     | 0                         | 0                    | 0                                      |
| Total,.....                            | 26             | 8         | 1           | 0            | 3     | 3                         | 2                    | 43                                     |

## FEMALE PATIENTS, RECENT CASES.

| Classification of Cases when admitted. | How Dismissed. |           |             |              |       | State of those Remaining. |                      | Total of the several (Classification). |
|----------------------------------------|----------------|-----------|-------------|--------------|-------|---------------------------|----------------------|----------------------------------------|
|                                        | Cured.         | Relieved. | By disease. | Transferred. | Died. | Improved.                 | Continuing the same. |                                        |
| Furious,.....                          | 8              | 3         | 0           | 0            | 0     | 0                         | 0                    | 11                                     |
| Melancholy,.....                       | 3              | 3         | 0           | 0            | 0     | 0                         | 0                    | 6                                      |
| Furious and Melancholy,                | 1              | 0         | 0           | 0            | 0     | 0                         | 1                    | 2                                      |
| Imbecile,.....                         | 1              | 0         | 0           | 0            | 0     | 0                         | 0                    | 1                                      |
| Fatuous,.....                          | 0              | 2         | 0           | 0            | 0     | 0                         | 0                    | 2                                      |
| Idiot,.....                            | 0              | 0         | 0           | 0            | 0     | 0                         | 0                    | 0                                      |
| Total,.....                            | 13             | 7         | 0           | 0            | 0     | 0                         | 1                    | 21                                     |

From these Tables it appears, that of the twenty-four old cases, only four males were cured; whereas, of the forty-three recent cases, thirteen males and thirteen females were cured.

The Patients have been treated on the same principles as formerly. Every attention has been paid to their comfort; each patient has been allowed the utmost degree of liberty, consistent with his own safety, and with that of his neighbours; and no coercive measures have been employed, but when absolutely necessary. We learn, from the reports of Dr. Carter, that in many Lunatic establishments on the Continent, if not in Britain, a very different system is still pursued; and that, especially at Genoa and Turin, and, as mentioned by Dr. Esquirol, in some parts of France, the most flagrant abuses prevail. We are not without hope, that reiterated statements of the salutary effects of mildness, may, by working their way to the eye of the proper authorities, be in some degree instrumental in effecting an amelioration in the condition of the sufferers.

In the moral management of Lunatics, it is generally of essential importance to possess their confidence, and, at the same time, to maintain complete ascendancy over them. The Patients must look on their Physician as their friend; but as a friend too powerful to be safely disobeyed. In attaining this parental kind of authority, a public asylum affords peculiar facilities. All Patients who are capable of any degree of reflection, are soon aware, either from their observation of the treatment of others, or from their own actual experience, that the commands of the Physician can be irresistibly executed;

yet favours and indulgences appear to flow from him, while those coercive measures which he is not observed to order, are very often ascribed to the keeper. But to maintain due ascendancy, measures of some degree of severity are occasionally unavoidable. Privations and various restrictive measures are the usual means of reducing Patients to obedience, and are generally successful. When these means fail, recourse is sometimes had to the whirling chair. The operation to which Patients are subjected in this machine, as managed in our Asylum, is perfectly safe; and, besides subduing, sometimes even permanently, the furious and refractory, has, in some forms of lunacy, a most salutary effect in promoting the cure.

As one of our means of moral, and also of mental management, divine service may be mentioned. An intelligent author\*, who bestows high encomiums on our Asylum, is of opinion, that religious consolation imparted privately, would be preferable to public worship; and it may be so in some particular cases, and especially if the service were performed agreeably to some established modes. For example, were it performed according to the mode of the Church of England, where each individual of the congregation repeats and responds at certain parts of the service, it might perhaps lead to an unbridled licence of tongue, which would, indeed, as the author says, be a mockery of religion. But the form of worship according to the Church of Scotland, is not liable to the same objection; and, as to preaching to un-elected auditors, on topics calculated to excite strong

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\* Dr. Burrow

emotions, or to foster gloomy impressions, we admit that it would be highly injudicious. Yet, with due respect for the opinion of the author, we cannot approve of the mode which he prefers. We greatly fear, that if a religious monitor were to enter the wards of an Asylum, he would unavoidably be assailed by patients with whom it was not intended that he should hold any communication; and that, even those persons to whom his attention might be expressly directed, would be injuriously chagrined or irritated, unless they were indulged in expatiating on the very subjects on which their minds were already too prone to dwell. But all speculative opinion must yield to the evidence of facts derived from actual experience. Sermons have been preached in our Asylum, to numerous and most attentive audiences, for nearly two years, and have not yet been observed to produce any injurious effect on the mind of any one of the auditors. Some of the Patients, it is true, may have listened to these sermons, without having been much edified, but all of them have been gratified, and many of them soothed and consoled.

Laborious employment, especially in the open air, not only improves bodily health, but also powerfully co-operates, with other means of regulating the mind, in promoting the cure of lunacy. Some Patients, whose cases appeared to be almost hopeless, recovered by labouring in the airing-grounds. On various occasions, when this employment was for a time suspended, some of our labourers, whose state of mind had been rapidly improving, remained without further amendment, or even grew worse; but soon after labour was resumed, they again proceeded to improve. In one remarkable



instance, in which the most fanciful and gloomy anticipations predominated, whenever the patient was warmed by toil, his mind was relieved. In general, so speedy was the favourable change, that, in this case, it seemed as if the vapours of the brain exhaled with the sweat of the brow. The beneficial effect of labour is, on the mind, twofold. It serves not only to dissipate gloomy and incoherent thought, by day, but also to prevent the distressing illusions of the night, by preparing the Patient for sound repose.

So many of the male Patients have laboured assiduously in the airing-grounds, or in the ground lately acquired, that there has not been so great a variety of handicraft operations carried on as formerly. Yet we have had tailors, shoemakers, a joiner, and a bookbinder, occasionally at work; and several Patients have been much employed in assisting the keepers or other servants. One of the Patients, who has been long an inmate of the Asylum, officiates in several capacities. He not only assists the keepers, but is very expert and serviceable in shaving his fellow Patients; and, besides being a scholar and a poet, he is a skilful musician, and, when divine service is performed, officiates admirably as precentor. The female Patients have been employed in a variety of appropriate occupations. Their labours in spinning, sewing, and washing, continue to be a considerable saving to the Institution; and, what is of much more importance, are of great use in promoting their own recovery.

Patients of superior rank, and also the labourers, in their intervals of rest, often spend a part of their time



agreeably in various amusements. Music, reading, bowls, billiards, &c. continue to be favourite pastimes. Materials for writing are liberally furnished. Some of the Patients write verses, but the muses have been unpropitious, and few verses have, for a long time, been produced, which, in point of poetical merit, reach even to mediocrity. The prose writers have been more successful. Many of their letters are correctly, and even elegantly penned. A great proportion of these letters are addressed to the Physician. These, and others not proper to be despatched, as addressed, are preserved; because the letter of a Patient serves as an indication and as a record of the state of his mind; and may also prove to be a useful document, if his case should ever become the subject of legal investigation. The object of the writer often is to demand the reason of his confinement, or to prove that he ought to be instantly liberated. In some of the letters, the style is diffuse and rhetorical; in others, the writer reasons more closely; and one ingenious person, whose literary productions are extremely curious, occasionally employs the form of syllogism. Some Patients exhibit, in their letters, a wonderful degree of consistency and acuteness. It is still perhaps too common to suppose, that all lunatics are, in point of mental degradation, nearly equal; and, therefore, that they are all equally removed from a capacity for common feeling, and from a right to common sympathy. But the forms of lunacy are so various, and aberration from soundness of mind, is, in some cases, so slight, that it would even be no easy task to determine the precise bounds of rationality. A great proportion of Lunatics, derive the usual enjoyment from cheerful aspect and variety of scene. Some are pecu-

liarily susceptible of impressions from external objects; and are, as poets, painters, botanists, or florists, delighted in contemplating the beauties of nature \*. Gardening, while it affords the means of exercising, and of gratifying the taste for an interesting class of objects, is a most salutary occupation; and, fortunately, it often becomes the favourite amusement of some lunatics, who, from their wealth and rank, are above the necessity of learning, and would disdain to be taught, any other laborious mechanical art. Patients who have been liberally educated, and who have been accustomed to the elegance of polished life and manners, often retain a fastidious taste, and a proud sense of their superiority. They not only would spurn at what they might conceive to be a degrading employment, but they feel indignant, unless their accommodation be of a

\* The following verses are inserted, not on account of their poetical merit, of which, however, they are not destitute, but as a proof of the interest which some insane persons take in external objects. These verses were lately written, or rather beautifully printed with the pen, as if with types, by a Patient who received a liberal education, but whose mind has long been much deranged. The poet has chosen to prefix to his verses a quotation from Virgil, an author with whose writings he is well acquainted.

#### TO A HYACINTH.

*Alas! Leggers, cadaver!* —

Our gardens may boast of their antiques fine,  
Auricula, tulip, and woodbore that twine,  
In morning of spring, or in bright summer showers,  
But give me a hyacinth—sweetest of flowers!  
Around the lone meadow where Flora has stray'd,  
See how gently it rears its sweet bloom for the maid.  
'Tis pure as the snow, on the smooth verdant lawn,  
As it blows in the sun-beam, succeeding the dawn, &c.

There are two other stanzas, in which the comparisons are a little extravagant, or even ludicrous, yet highly expressive of the poet's admiration of his favourite flower.

superior kind, and are apt to be offended, when exposed to the company and conversation of any person whom they may deem to be an unworthy associate. For such Patients, small suites of apartments, unconnected with the common wards, have long been much in request, and will soon be provided. Patients of the higher ranks will thus be agreeably accommodated. And, while they will be permitted to enjoy the greatest possible degree of personal liberty, consistent with the necessary treatment, they will be furnished with the means of such suitable amusements and recreations, as will serve, both to relieve the irksomeness of confinement, and to promote the cure of the malady.

Previously to the erecting of any building in the new ground, where accommodations for Patients of the higher ranks will be erected; and in order that our numerous labourers might, without the chance of escaping, be employed in reducing the surface of the ground to a proper level, it was expedient that the whole area should be securely enclosed. Accordingly, that extensive space has been enclosed with a lofty and substantial wall, and considerable progress has been made, by the Patients, under the directions of the Superintendent, in levelling the ground. At the same time, the two adjacent airing-grounds were subdivided according to the original plan, and, as now highly expedient, into four plots. Two of these plots have been replanted with shrubbery, and properly dressed, for the use of convalescents. In the course of these operations, it was necessary, at our own expense, to take down, and to rebuild, to an increased height, the wall on the northern boundary of the ground of the Magdalene Asylum; and also to add to the height



of some parts of our own adjoining wall stretching westward. The whole of the walls erected, measure no fewer than sixty-three roods; and the expense of building, amounts nearly to the sum of one thousand pounds. Some extraordinary incidental expenses have been incurred. The roof of the Asylum has undergone a necessary and complete repair; some of the apartments in the ground flat, which used to be damp, have been re-paved with stones less pervious to moisture than those of the original pavement; and the walls surrounding the airing-grounds have been thoroughly repaired. In consequence of all these expenses, a large debt has been incurred to the Secretary, for money advanced by him, while the fen-duty of the additional ground, and several accounts, still remain unpaid. On the other hand, the board of the Patients, in consequence of an increase in the proportion of Patients at the higher rates of board, has been more productive than formerly; and, with the aid of donations, the whole of the debt which, at the commencement of the year, remained due to the Royal Bank, has been liquidated. But, to discharge the debts incurred, and to erect additional buildings, the Directors have now no other means, than by again operating on the bond formerly granted to the Bank, for a credit to the extent of 2000*l.* as will be evident, from the following statement.

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RECEIPTS & DISBURSEMENTS

For the Year 1820.

Receipts.

SUBSCRIPTIONS and LEGACIES, £1106 7 6		
Add, found in Charity-Box,.....	59 12 0	
	<hr/>	£1145 19 6
BOARD of the Patients,.....	3719 4 1	
	<hr/>	<hr/>
		£4865 5 7

Disbursements.

Balance due the Secretary, per Report for 1819,.....£ 481 1 11½

HOUSE EXPENSE, viz.

Accounts for Butcher Meat,.....	£499 15 9	
Do. Bread,.....	267 19 0½	
Do. Beer,.....	214 2 9	
Do. Groceries,.....	159 6 4	
Do. Tea,.....	75 5 6	
Do. Soap and Candle,.....	159 16 1	
Do. Coals,.....	129 3 0	
Do. Medicines,.....	15 6 0	
Do. Meal,.....	95 19 6	
Do. Butter,.....	145 16 8	
Do. Cheese, &c.	152 10 8	
Do. Barley, Pease, &c.....	125 16 0	
Do. Potatoes, Milk, Vegetables, Hay, Straw, Lint, Oil, and other Miscellaneous Articles,	377 10 6½	
	<hr/>	2570 5 10

SALARIES to Superintendent, Matron, Surgeon, Secre- tary, and Porter,.....	377 5 0	
WAGES to Keepers and Inferior Servants,.....	277 17 7	
FURNITURE Bought,.....	165 17 6	
ROYAL BANK, in full of Debt,.....	800 0 0	
	<hr/>	<hr/>

Carried forward,.....£4472 5 10½

Brought forward,.....£1472 5 10½

CHARGES, &c.

Interest to Royal Bank,.....	£ 71 11 9	
Printing,.....	13 4 0	
Advertisements,	2 8 0	
Legacy-Duty, and other Taxes,.....	6 15 10	
Stationery,.....	10 14 3	
Insurance,.....	5 0 0	
Rent of Ground,.....	13 10 0	
Repairs,.....	13 7 11	
Stationery, Postage, and Incidents,.....	13 10 4	
	<hr/>	711 1 11½
		<hr/>
Additional Buildings,.....	1005 18 11	
	<hr/>	5790 6 9
	<hr/>	<hr/>
Amount of DISBURSEMENTS,.....	5790 6 9	
Do. RECEIPTS,.....	4985 5 7	
	<hr/>	<hr/>
Balance due the Secretary,.....	£805 3 2	
	<hr/>	<hr/>

STATE OF DEBTS

DUE by the ASYLUM, at 30th Dec. 1820.

To the Secretary, for Cash advanced,.....	£725 3 2
Unpaid Accounts, and Pen-Duty, about.....	194 16 10
	<hr/>
Total,.....	£919 0 0
	<hr/>

The Directors regret that, partly from the state of the funds, and partly from the difficulty of fixing on a proper plan for the extension of the Asylum, they have not yet been able to erect any of the projected additional accommodations. Before any addition can, with propriety, be erected, in the area lately enclosed, it will be necessary, that a plan of the area, and of all the various accommodations of which the whole of that space can conveniently admit, be devised and adopted, in order that the most eligible situation for any requisite addition may, if possi-

ble, he ascertained. The execution only of a small part of such a plan, is all the additional building that we at present contemplate, and all that we can possibly undertake. But it must be obvious that, if we proceed without a general plan, whatever building we may first erect may be so placed, that it shall be found, at some future period, to be an incumbrance, or an obstacle to further extension, and may, therefore, even have to be removed. Some apprehensions, indeed, have been expressed that, by extension, the establishment may at length become unmanageable; and this objection to the building of any great addition deserves to be considered. It has been proposed to erect, somewhere within the precincts of the Asylum, a large building for incurables. The inmates of this building will be numerous, and will probably require a subordinate superintendent or overseer; but will not occasion very great additional trouble, either to the Physician or to the principal Superintendent. After excluding the space necessary for the wards and airing-grounds of the incurables, the whole of the remaining space, although we were to adopt every practicable mode of extending our buildings, would not probably admit of proper accommodations for more than two hundred Patients, including the number of Patients which the present building is calculated to contain. But in several Lunatic Asylums, the number of Patients greatly exceeds two hundred; and, while the whole establishment can be duly superintended by one person, it cannot well be too large. The Salpêtrière contains no fewer than eight hundred Patients, and is well conducted, by one Superintendent, under the directions of one Physician. A large establishment possesses some important advantages. It is more economical than a small one. For example, although our

Asylum were extended, so as to contain two or even three times its present number of Patients, yet nearly the same attendants who are necessary now, with an exception as to the number of keepers, and nearly the same accommodations for cooking, washing, &c. would then be sufficient *. In point of classification, as well as of economy, the advantage is greatly in favour of a large establishment. In a small Asylum, if the means of proper classification were provided, and if the Patients were classed accordingly, there might often, from the want of sufficient variety in the cases, be wards and keepers totally unemployed; or sometimes, from great variety, in a comparatively small number of cases, there might be as many wards or keepers as there were Patients. And if, to save expenses, the means of proper classification be not provided, then Patients who ought to be separated are necessarily placed together. But the larger the establishment, the greater is the chance that there will always be a sufficient number of Patients, of each class, to employ a keeper and to occupy a ward †. For those

* Our kitchen, washing-room, and laundry, are too small for the present Asylum, and they are otherwise unnecessary.

† ——— il faudra des subdivisions pour les furieux en traitement, pour les furieux incurables, pour les mélancoliques calmes, pour les mélancoliques agités, pour les déliés, pour les exaltés, pour ceux qui salissent; il faudra des promenoirs couverts, des ateliers, des refectoires, une infirmerie, une salle de bain, etc. Ces subdivisions, si dignes aujourd'hui pour tout hospice d'aliénés bien ordonné, ne pourront se faire dans un asile destiné à un petit nombre d'individus; car il y aurait presque autant de subdivisions que d'habitans. Il faudra pour chacune de ces subdivisions au moins un serviteur, il y aura donc presque autant de serviteurs que de malades. Si l'on n'adopte pas la subdivision des bâtimens, on retombera dans le système actuel; on se contentera de séparer les furieux, et d'entasser pêle-mêle les autres aliénés, système contre lequel réclame hautement l'expérience de tous les pays où les aliénés ont excité quelques sentimens d'intérêt et de pitié. — Esquirol.

reasons, without calculating the probable limits of the demand for accommodations, and of the means of erecting them, there can be but little ground for apprehending that our Asylum will ever become too extensive. And, while it shall continue to be well managed, the more it extends, the more likely is its fame to extend, and its future prosperity to be ensured.

The elongation of the wings of the Asylum was originally proposed, as the best plan of enlargement*. This plan would, no doubt, be attended with important advantages; but it is liable to some objections. We refrain from entering on a discussion which might, in any degree, tend to confine the views of the architect, and which would protract this Report to an undue length; yet it is necessary to state, that this plan would not afford us the kind of accommodations which we chiefly want, and which will be best supplied by erecting cottages, as suggested in the last Annual Report. But, in regard to the general plan of enlargement, we may, without intruding on the peculiar province of the architect, remark, that the means of the most advantageous classification, and of ensuring the comfort and security of the Patients; must be duly studied; while the whole buildings which may be projected, whether for the lodgement of Patients, or for other necessary purposes, together with the airing-grounds and approaches, ought to be so contrived as to afford, when executed, the greatest possible facility to the vigilant and effectual superintendence of every department of the establishment.

* Remarks on Lunatic Asylums, by Mr. Starke.—Second Annual Report.

Some excellent plans have been drawn by Mr. Weir. Several other eminent architects, namely, Mr. Luger, of London, and Messrs. Hamilton, of Glasgow, have made gratuitous offers of their services. Of these offers, the Directors readily agreed to avail themselves; and they have no doubt, that a plan will ultimately be adopted, which will give entire satisfaction to the Contributors, and to the Public.

The Directors return their most respectful thanks to those Clergymen, who preached in the Asylum in the course of last year; and beg leave to solicit, that the Clergymen of the City and Suburbs will be so obliging as to favour the Institution with their occasional services during the current year. Our Asylum, we believe, is the first establishment of the kind, in which a sermon was ever preached. From our example, divine service is now performed in several other similar establishments.

The Directors, with gratitude, return their thanks for all the benefactions with which they have been favoured during last year. A list of the donations in money is annexed, as formerly. The Patients have been much gratified by donations of books, magazines, &c. and of the means of amusing themselves at various games.

The late Miss Mary Hood, having destined, in trust, the greater part of her fortune to purposes of charity and beneficence, the Trustees on her Estate, by virtue of a discretionary power committed to them, have bestowed on the Asylum the large sum of one

thousand pounds. While the Directors record their respect for the memory of their charitable benefactress, they most gratefully thank the Trustees, for this seasonable and splendid donation.

The Directors return their thanks to those Coal-masters, who, with their usual liberality, have sent to the Asylum donations of Coals. No fewer than 415 carts of Coals, were purchased for the use of the house, during last year. The additional number gratuitously sent by the Coal-masters, was 49 carts, *viz.*

Mr. FARIE,.....12 Carts.	GENERAL SPENS, 6 Carts.
Mr. GRAY,.....12 do.	Mr. GEMMEL,.....6 do.
Mr. MERRY,... 8 do.	Mr. BROWN,.....5 do.

The Directors offer their best thanks to the Physician, Surgeon, Superintendent, and Matron; and they, with great pleasure, express their approbation of the conduct of those Keepers and other Servants, who have diligently and faithfully discharged their duty.

Finally, the Directors return their thanks, and acknowledge their great obligations to the Visitors. "Every charitable institution requires constant and vigilant inspection; but especially where," as in the Asylum, "the suffering individuals are often incapable of knowing the neglect which they may experience—of finding redress for the evils which they may feel—of making known their complaints—or of obtaining belief, when they are made *." The mild system of treatment pursued in our Asylum, the consequent quietness which has often ex-

* Discourses, &c. by the Rev. Dr. M'Gill.

cited the admiration of strangers, and the extremely clean and orderly state of the wards, as well as other prominent merits of our Institution, are in no small degree owing to the vigilance of the Visitors. And although there has been no remissness in any department of the daily business of the house, but, in every respect, the utmost attention; yet a public Institution is never more liable to abuse, than after its reputation has become so high, as to place it above all suspicion; and it is of essential importance that the Visitors should persevere in the regular and strict performance of their duty. That duty consists in visiting the Asylum, at least twice a-week, but oftener, if convenient; and in reporting with regard to whatever may seem to affect the comfort of the Patients, and may be thought worthy of remark. The Visitors will, no doubt, see the propriety of paying as much attention as possible to the following circumstances; namely, to the ventilation, in order that the galleries and apartments may be kept as sweet and salubrious as possible; to the temperature, which, in cold weather, ought generally to be about 60 degrees; to the cleanliness of the wards, and to that of the persons, as well as of the body and bed-clothes of the Patients; to the kind and degree of restraint employed; to the demeanour of the keepers, in so far as this may fall under notice; to the quality of the provisions; to the cookery; and to the general state of order of the whole establishment. The friends of some of the Patients strictly prohibit the sending out of the Asylum, any letters which may be written by these Patients. The Visitors are, therefore, requested to leave, on the table of the committee-room, any letters which may be committed to their care, by any of the Patients.

From the excellent manner in which the business of the house has uniformly been conducted, the Directors are confident that, under the vigilant inspection of the Visitors, our Institution will continue to maintain that high character, which is now universally acknowledged, and which has long rendered the Glasgow Lunatic Asylum one of the most interesting of all the charitable establishments in Scotland.

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## APPENDIX.

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THE following Instructions to the Architect, for drawing a Plan of Addition to the Asylum, are annexed to the Report, by order of the Directors.

The Architect is required to furnish Plans of Additional Accommodation, according to the following statement.

1st, A building, to comprise a chapel, a billiard-room, and work-rooms. The ground flat of this building may contain a kitchen, a scullery, a store-room, and a weaver's shop. This building may possibly form a centre-piece to the whole establishment, and may ultimately be the most eligible place of residence for the Superintendent and Matron. Apartments for their accommodation may therefore be here provided.

The chapel must be large enough to contain about 100 auditors. The means of separating the males from the females, so that they shall not be able to see each other, while they may all have it in their power to see the clergyman, and may be as much as possible



within his view; and also the means of separating the Patients of the higher ranks from their inferiors, must be considered, as these arrangements for which, also, a plan must be given, may in some measure guide the Architect in regard to the form and dimensions of the room. Except on Sundays, the chapel will be used as a reading-room; and, therefore, all the seats must be moveable.

The kitchen ought to be of a size sufficient both for the present Asylum, and for any additional wards, or other accommodations, which may in future be constructed.

The building must be so planned, as to admit of its connection with wards, and this connection must be exhibited in the plan. But although a chapel, work-rooms, and a billiard-room are much wanted, and the other apartments may soon be highly requisite, yet the Architect is distinctly to understand, that he is not tied down, to plan these apartments so that they shall all be exactly contained in one building, nor is he restricted in regard to the situation of the building, in which any of them may be contained.

2d, Buildings to contain wards for Patients of respectable rank, or at least of rank superior to that of paupers. We require, at present, additional accommodations for about 30 Patients. But the Architect is not to confine his views to our present wants. Therefore, the number and extent, as well as the disposition of these buildings, and of proper airing-grounds for each class of the Patients, must be left to his own judgment:



it being understood, that the ground shall be laid out with due regard to economy. These buildings must not exceed, in height, two stories. The wards may be planned in the same manner as the wards for the higher classes of Patients in the present Asylum. The galleries may be of the same breadth, and the apartments of the same dimensions. Besides the necessary day-rooms, dining-rooms, keepers' rooms, and water-closets, it is desirable that there should be a bath-room for each ward, or at least one for every two wards which may be on the same flat. The Architect is desired to suggest a convenient mode of subdividing each ward into two, or even into three suites of apartments; especially if the number of apartments should exceed the number contained in any of the present wards. In planning the stairs for the upper wards, the Architect must consider, that the stair of a Lunatic Asylum ought not to consist of a long, uninterrupted flight of steps; and that it ought to be easy of ascent, well lighted, and, if possible, so constructed, that it may be all seen at one view. Without entering too minutely into detail, it may be proper to mention, that the walls and floors of apartments for frantic Patients, ought to be of polished stone; and that the windows in the apartments for convalescents, ought not to be farther from the floor, than the windows of a common dwelling-house.

3d, Cottages for the accommodation of Patients of the highest class. These buildings probably ought not to exceed one story in height. But, in regard to height, the Architect is not absolutely restricted. Each cottage, or, if it consist of two flats, each flat must be so contrived, that it may be wholly occupied by one, or may

afford distinct lodgings for two Patients. Each Patient must be accommodated with a parlour, bed-room, and servant's bed-room or closet. Each individual lodging may be furnished with a small garden. The gardens may be separated from each other, merely by hedge-rows, and may each lead to a commodious common walk, or bowling-green. The Architect is required to give a plan of the gardens, and of the manner in which they may be ornamentally laid out. In the walk or bowling-green, and also in the gardens, or connected with the cottages, there must be shaded seats, or verandas, where the Patients may enjoy the benefit of the open air, without being exposed to sun or rain. Drawings of such seats or verandas may be given.

4th, A building to contain one hundred incurables. The only means of classification to be observed in this building, is that of separating the males from the females. Each apartment may be as large, as to accommodate a dozen or more Patients, and there may be apartments on both sides of the galleries. A proper extent of airing-ground, must be allotted for the incurables of each sex. This building ought to be so placed, that it shall be as little seen as possible by Patients of the higher rank, or by their visiting friends.

5th, Washing-house, drying-green, straw store-house, coal store-cellar, dead-house, and dungstead. All these conveniences may be comprehended in one division of the ground.

In devising the Plan of Addition, the Architect will consider, and determine the following points.

1st, From what quarter, the area lately enclosed may be most conveniently approached; and what ought to be the direction, and the breadth of the avenue, leading to the buildings in that area, and perhaps, serving ultimately as the main approach to the whole establishment.

2d, Where, and in what manner the most convenient means of communication, may be formed between the present Asylum, and any other building, or accommodations which may be projected.

3d, Whether, as a part of the plan of extension, it would be advisable to elongate the wings of the present building. If this measure should be thought advisable, a plan of the wings as elongated, will be required.

Besides furnishing geometrical plans, elevations, and, if necessary, sections of the buildings, exhibiting in detail interior arrangement, as well as exterior aspect, the Architect is required to furnish a general plan of the whole grounds, and to insert, in their proper places, block-plans or outlines of all the present buildings, and of all the additional buildings, as above described, of which the whole space will admit; together with delineations of the airing-grounds, garden, washing establishment, and avenues.

To this plan, it will be proper to add an outline of the Magdalene ground, and also delineations of the roads in front and in rear of the Lunatic Asylum, to the point of intersection, together with the intercepted portion, of Dobbie's Loan.



The Architect must give plans of the necessary drains or sewers, and he must advert to the means of supplying the establishment with water, gas-light, and heated air.

It is of great importance that the Physician, Superintendent, or Matron, should be able to proceed from any one part, to any other of the whole establishment, without being observed from any of the windows, either by Keepers or by Patients. The Architect must, therefore, contrive to secure this advantage, either by connecting the different buildings with each other, or by means of walls, corridors, or covered passages. Such passages may be made very broad, open at one or at both sides, and so as to answer for places of recreation in bad weather.

In the elevations of the buildings for Patients of the more respectable classes, there must neither be extravagant decoration, nor any appearance of meanness. And although every consideration must yield to that of utility, yet the Architect is strictly enjoined, not, if possible, to plan any building, which, from its structure or situation, might, when erected, injure the aspect of the present elegant and picturesque edifice.



## LIST OF DIRECTORS, &amp;c.

For 1821.

The LORD PROVOST, President, *ex officio*.

|                                          |   |                                             |
|------------------------------------------|---|---------------------------------------------|
| Mr. Alexander Wighton,                   | } | from Town Council.                          |
| James Hunter,                            |   |                                             |
| William Smith,                           | } | from Merchants' House.                      |
| James Ewing,                             |   |                                             |
| Robert Hood,                             | } | from Trades' House.                         |
| Robert Austin,                           |   |                                             |
| Dr. Richard Miller,                      | } | from Faculty of Physicians<br>and Surgeons. |
| William Cumin,                           |   |                                             |
| Rev. Dr. Muir,                           | } | from General Session.                       |
| Mr. Robert Tennant,                      |   |                                             |
| Archibald Lawson,                        | } |                                             |
| Rev. Dr. Ranken,                         |   |                                             |
| Prof. McGill,                            | } | from General Body of Sub-<br>scribers.      |
| Meikleham,                               |   |                                             |
| Mr. John Lang,                           | } |                                             |
| George Rutherford,                       |   |                                             |
| John Machen,                             | } |                                             |
| William Jamieson, Jun.                   |   |                                             |
| The Chief Magistrate of Paisley,         | } | Directors, <i>ex<br/>officio</i> .          |
| Dr. James Jeffray, Professor of Anatomy, |   |                                             |
| Robert Freer, Professor of Medicine,     | } |                                             |
| Mr. William Rodger, Treasurer,           |   |                                             |
| Dr. Balmanno, Physician,                 | } |                                             |
| Dr. William Cumin, Surgeon.              |   |                                             |
| Mr. Donald Cuthbertson, Secretary.       | } |                                             |
| William Drury, Superintendent.           |   |                                             |
| Mrs. Drury, Matron.                      | } |                                             |
| John Kirk, Porter.                       |   |                                             |

## WEEKLY COMMITTEE.

|               |                       |             |                |
|---------------|-----------------------|-------------|----------------|
| Dr. Balmanno, | } <i>ex officio</i> . | Mr. Machen, | Pr. Meikleham. |
| Mr. Rodger,   |                       | Rutherford, | Dr. Cumin.     |

## BUILDING COMMITTEE.

|              |                 |             |
|--------------|-----------------|-------------|
| Dr. Jeffray, | Mr. Rutherford, | Mr. Lawson, |
| Balmanno,    | Dr. Meikleham,  | Rodger.     |

## VISITORS

|                            |                  |
|----------------------------|------------------|
| Dr. Freer,                 | Mr. Robert Hood, |
| Rev. Dr. Ranken,           | Benjamin Mathie, |
| Mr. George Rutherford,     | William Smith,   |
| Alexander Wighton,         | David Crawford,  |
| John Swanston,             | Andrew Ranken,   |
| Dr. Jeffray,               | James Hunter.    |
| Mr. William Jamieson, Jun. |                  |

## LIST OF CONTRIBUTIONS,

*Received in 1820.*

|                                                                                                                                                                          |       |    |    |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|----|----|---|
| Anonymous, a Gentleman,.....                                                                                                                                             | £     | 1  | 1  | 0 |
| Lady Ross Baillie's Executors, Ninth Annual<br>Donation, in terms of her Ladyship's Bond<br>to the Institution, for payment of this sum<br>annually, for 20 years, ..... |       | 5  | 5  | 0 |
| Barony Parish, additional Contribution,.....                                                                                                                             |       | 3  | 5  | 0 |
| Herbert Buchanan, of Arden, .....                                                                                                                                        |       | 5  | 0  | 0 |
| Rev. Dr. Burns, Glasgow,.....                                                                                                                                            |       | 5  | 5  | 0 |
| Executors of Mrs. Campbell, of Violet Grove,<br>a Legacy,.....£20                                                                                                        |       | 0  | 0  |   |
| Deduct Legacy-Duty,.....                                                                                                                                                 |       | 2  | 0  | 0 |
|                                                                                                                                                                          |       | 18 | 0  | 0 |
| James Glassford, of Dougalston,.....                                                                                                                                     |       | 1  | 11 | 6 |
| Executors of Miss Mary Hood, of Glasgow,<br>a Donation from the Residue of her Estate,<br>left at their disposal for charitable and be-<br>nevolent purposes,.....       | 1000  | 0  | 0  |   |
| Executors of Mrs. M'Aslan, Maxwell-Street,<br>Glasgow, a Legacy,.....                                                                                                    | 15    | 0  | 0  |   |
| Miss M'Grigor, Cochran-Street, Glasgow,.....                                                                                                                             | 1     | 1  | 0  |   |
| John Pirie, London, .....                                                                                                                                                | 5     | 5  | 0  |   |
| Mrs. James Smith, George's Square, Glasgow,                                                                                                                              | 5     | 5  | 0  |   |
| Lady Stewart, of Castlemilk,.....                                                                                                                                        | 2     | 2  | 0  |   |
| William Stirling, Castlemilk,.....                                                                                                                                       | 6     | 0  | 0  |   |
| Executors of William Taylor, Merchant, Glas-<br>gow, a Legacy,.....                                                                                                      | 25    | 0  | 0  |   |
| Mrs. Watt, of Heathfield,.....                                                                                                                                           | 2     | 2  | 0  |   |
| J. S. Wright, Bullcote Lodge,.....                                                                                                                                       | 5     | 5  | 0  |   |
|                                                                                                                                                                          | £1106 | 7  | 6  |   |

*LIST of PARISHES, which, by contributing the requisite Sum in proportion to their population, have acquired the privilege of recommending their Insane Poor for Admission into the Asylum, on the same terms with those of the City of Glasgow.*

|                    |                   |                  |
|--------------------|-------------------|------------------|
| Ayr,               | Houstoun and Kil- | Monkton & Prest- |
| Balfernock,        | allan,            | wick,            |
| Barony of Glasgow, | Kilsyth,          | Port-Glasgow,    |
| Bonhill,           | Kippen,           | Renfrew,         |
| Carmunnock,        | Lanark,           | Rothway,         |
| Cathcart,          | Lismahagew,       | Neilston.        |
| Cumbernauld,       | Logie,            |                  |
| Greenock,          | New Monkland,     |                  |

